PUBLIC HEALTH						
HCPCS/						
Local		CPT				
Code	Local Descriptor	Code	CPT Descriptor			
02300	Assessment/CHNC (Child Health Nsg. Conference) (full)	T1001	Nursing assessment/evaluation			
02301	Assessment/CHNC (partial)	T1001	Nursing assessment/evaluation			
02302	Blood draw	36415	Collection of venous blood by venipuncture			
02303	Blood pressure		This service should be included in the nursing assessment/eval.			
02304	Blood sugar/FBS	82947	Glucose; quantitative, blood (except reagent strip)			
		82948	Glucose; blood, reagent strip			
02305	Catheter care/baths	T1002	RN services, up to 15 minutes			
		T1003	LPN/LVN services, up to 15 minutes			
	į	T1004	Services of a qualified nursing aide, up to 15 minutes			
02306	Cholesterol testing	82465	Cholesterol, serum or whole blood, total			
02307	Colorectal cancer screening,	G0107	Colorectal fecal occult blood test, 1-3 simultaneous determinations			
02308	Denver developmental test	96110	Developmental testing; limited (eg, Developmental Screening Test II,) with interpretation			
		ļ	and report			
02309	Dressing change	T1002	RN services, up to 15 minutes			
		T1003	LPN/LVN services, up to 15 minutes			
02310	Ear checks	T1001	Nursing assessment/evaluation			
02311	Ear irrigation (bilateral)	69210	Removal impacted cerumen, one or both ears			
02312	Hearing screening	V5008	Hearing screening w/report			
02313	Heart/lung sounds	T1001	Nursing assessment/evaluation			
02314	Hemoglobin	85018	Hemoglobin			
02315	Home visits	T1021	Home health aid or certified nurse assistant, per visit			
	į	T1030	Nursing care, in the home, by RN, per diem			
		T1031	Nursing care, in the home, by LPN, per diem			
02316	Impetigo/skin rash	T1001	Nursing assessment/evaluation			
02317	Lice check	T1001	Nursing assessment/evaluation			
02318	Lipid profile (fasting)	80061	Lipid panel includes cholesterol, serum, total; HDL; Triglycerides			
02319	Mantoux – TB skin test	86585	TB, tine test			
02320	Nutrition counseling (Services must be rendered by a	97802	Medical nutrition therapy; initial assessment and intervention, individual, face-to-face			
	Licensed Nutritionist or LRD/ CDE)		w/patient, each 15 minutes			
		97803	Medical nutrition therapy; re-assessment and ntervention, individual, face-to-face			
	į	<u>[</u>	w/patient, each 15 minutes			
		97804	Medical nutrition therapy; group (2 or more individuals), each 30 minutes			
02321	Pacemaker Check	T1001	Nursing assessment/evaluation			
02322	Pedicure/foot and toenail care	11719	Considered routine (Noncovered) unless footcare criteria is met.			
		(S0390)				
02324	Rapid inspection	T1001	Nursing assessment/evaluation			
02325	Suture removal	N/A	Included in the initial laceration repair/global surgery			
02326	Throat culture	87430	Streptococcus, group A			
02328	Tympanogram	92567	Tympanometry (impedance testing)			

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02329	Urinalysis, by dipstick	81002	Non-automated, w/o microscopy			
02330	Vision screening (Vision screening using Snellen eye chart is included in T1001)	99172	Use only with automated or semi-automated bilateral quantitative determination of visual acuity, ocular alignment, color vision by pseudoisochromatic plates, and field of vision			
02331	Med. injection (own meds) subq or IM	90782	Therapeutic, prophylactic or diagnostic injection (specify the material injected); subq or IM			
02334	Hormone (injection only) subq or IM	90782	Therapeutic, prophylactic or diagnostic injection (specify the material injected); subq or IM			
02339	Nutrition screening (Services must be rendered by a Licensed Nutritionist or LRD/CDE)	97802	Medical nutrition therapy; initial assessment and intervention, individual, face-to-face w/patient, each 15 minutes			
02340	Nutrition assessment (Services must be rendered by a Licensed Nutritionist or LRD/CDE)	97802	Medical nutrition therapy; <u>initial assessment</u> and intervention, individual, face-to-face w/patient, each 15 minutes			
02341	Nutrition consults (Services must be rendered by a Licensed Nutritionist or LRD/CDE)	97802	Medical nutrition therapy; <u>initial assessment</u> and intervention, individual, face-to-face w/patient, each 15 minutes			
02342	Nutrition follow-up evaluation (Services must be rendered by a Licensed Nutritionist or LRD/CDE)	97803	Medical nutrition therapy; <u>re-assessment</u> and intervention, individual, face-to-face w/patient, each 15 minutes			
02345	OPOP visit (Pregnancy)(LSW, RN, Nutritional Services)	T1015	Clinic visit/encounter, all-inclusive			
02346	EPSDT screening	S0302	Completed EPSDT service			
02348	Med. administration	H0033	Oral medication administration, direct observation (ETOH and Drug Abuse Treatment Services)			
02392	Scoliosis/orthopedic	T1001	Nursing assessment/evaluation			
02393	Cleft lip/palate	T1001	Nursing assessment/evaluation			
02332	Immunizations					
02333	Allergy Injection	95115	Professional service for allergen immunotherapy not including provision of allergenic extracts; single injection			
		95117	; two or more injections			
02335	IPV – Polio (adults only)	90713- SL*	Poliovirus vaccine, inactivated (IPV), for subq use			
02337	Pneumonia Vaccine	90669	Pneumococcal conjugate vaccine,, for children under 5 years, for IM use			
		90732	Pneumococcal vaccine,, for use in individuals 2 years or older, for subq or IM use			
02338	Rabies Vaccine	90675	Rabies vaccine, for IM use			
		90676	Rabies vaccine, for intradermal use			
02343	Hepatitis B Vaccine	90743	90743 - Hepatitis B vaccine, adolescent (2 dose schedule),			
		90744	90744 – Hepatitis B vaccine, pediatric/adolescent dosage for IM use (3 dose schedule), for IM use			
		90746	90746 - Hepatitis B vaccine, adult dosage, for IM use			
02344	Influenza Vaccine	90657	90657 - Influenza virus vaccine, split virus, 6-35 months dosage, for IM or jet injection use			

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Code	Local Descriptor	Code	CPT Descriptor			
		90658	90658 – Influenza virus vaccine, split virus vaccine, split virus, 3 years and above dosage, for IM or jet injection use			
		90659	90659 - Influenza virus vaccine, whole virus, for IM or jet injection use			
02347	Varicella Vaccine	90716	90716 - Varicella virus vaccine, live, for subq use			
			*SL – State supplied vaccine			
			T1001 – Nursing assessment/evaluation			
			T1002 – RN services, up to 15 minutes			
			T1003 – LPN services, up to 15 minutes			
			T1015 – Clinic visit/encounter, all-inclusive			
			T1021 – Home health aide or certified nurse assistant, per visit			